

FORM PTO-1618A
Expires 06/30/99
OMB 0651-0027

U.S. Department of Commerce
Patent and Trademark Office
TRADEMARK

RECORDATION FORM COVER SHEET TRADEMARKS ONLY

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

Submission Type

- New
- Resubmission (Non-Recordation)
Document ID # _____
- Correction of PTO Error
Reel # _____ Frame # _____
- Corrective Document
Reel # _____ Frame # _____

Conveyance Type

- Assignment License
- Security Agreement Nunc Pro Tunc Assignment
Effective Date
Month Day Year _____
- Merger
- Change of Name
- Other _____

Conveying Party

Mark if additional names of conveying parties attached

Execution Date
Month Day Year
Dec. 19, 2000

Name Nelson Enterprises Family Limited Partnership

Formerly _____

- Individual General Partnership Limited Partnership Corporation Association
- Other _____

Citizenship/State of Incorporation/Organization Wisconsin

Receiving Party

Mark if additional names of receiving parties attached

Name The Life @ Work Company, Inc.

DBA/AKA/TA _____

Composed of _____

Address (line 1) 112 West Center Street, Suite 415

Address (line 2) _____

Address (line 3) Fayetteville Arkansas 72701
City State/Country Zip Code

- Individual General Partnership Limited Partnership if document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attached. (Designation must be a separate document from Assignment.)
- Corporation Association
- Other _____

Citizenship/State of Incorporation/Organization Arkansas

FOR OFFICE USE ONLY

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0651-0027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS.

Mail documents to be recorded with required cover sheet(s) information to:
Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20503

FORM PTO-1618A (Rev. 06/98)

700004207

REEL: 002204 FRAME: 0072

FORM PTO-1618B
Expires 08/30/99
OMB 0851-0027

U.S. Department of Commerce
Patent and Trademark Office
TRADEMARK

Domestic Representative Name and Address Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

Correspondent Name and Address Area Code and Telephone Number

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

Pages Enter the total number of pages of the attached conveyance document including any attachments. #

Trademark Application Number(s) or Registration Number(s) Mark if additional numbers attached
Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

| Trademark Application Number(s) | | | Registration Number(s) | | |
|---|---|----------------------|--|----------------------|----------------------|
| <input type="text" value="75/635,121"/> | <input type="text" value="75/644,340"/> | <input type="text"/> | <input type="text" value="2,254,977"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

Number of Properties Enter the total number of properties involved. #

Fee Amount Fee Amount for Properties Listed (37 CFR 3.41): \$

Method of Payment: Enclosed Deposit Account

Deposit Account (Enter for payment by deposit account or if additional fees can be charged to the account.) Deposit Account Number: #

Authorization to charge additional fees: Yes No

Statement and Signature

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. Charges to deposit account are authorized, as indicated herein.

Cheryl M. Smukowski Cheryl M. Smukowski March 2, 2001
Name of Person Signing Signature Date Signed

Assignment of Trademarks

This Assignment of Trademarks is made as of December 19, 2000, by and between Nelson Enterprises Family Limited Partnership, a Wisconsin limited partnership with its principal place of business at 516 Second Street, Suite 213, Hudson, Wisconsin 54016 ("Seller"), and The Life @ Work Company, Inc., an Arkansas corporation with its principal place of business at 112 West Center Street, Suite 415, Fayetteville, Arkansas 72701 ("Buyer").

WHEREAS, Seller is the owner of the trademarks shown on the attached Schedule 1, the registrations and applications for registration thereof with the U.S. Patent and Trademark Office, and the business and good will of the business in connection therewith (the "Trademarks");

AND WHEREAS, Buyer is desirous of acquiring the Trademarks.

NOW, THEREFORE, for good and valuable consideration, the receipt and sufficiency of which are hereby expressly acknowledged, Seller hereby sells, assigns, and transfers to Buyer, Seller's entire right, title and interest in and to the Trademarks and Seller's entire right, title and interest in and to any and all claims and demands it may have, at law or in equity, for past infringement of the Trademarks.

This Assignment of Trademarks shall be governed by the Charitable Contribution Agreement by and between Seller and Buyer, dated as of December 19, 2000.

IN WITNESS WHEREOF, Seller has caused this Assignment of Trademarks to be executed and sealed by its duly authorized officer as of the date first written above.

Nelson Enterprises Family Limited
Partnership

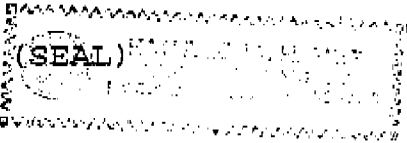
By:


Name:

Title: General Partner

STATE OF ~~WISCONSIN~~ ^{MINNESOTA})
) ss.)
WASHINGTON COUNTY)

Personally came before me this December 19, 2000, the above named individual, to me known to the be person who executed the foregoing instrument and acknowledged the same.



Kathleen J. Hamer
Notary Public, State of Wisconsin
My commission expires: 1-31-2005

**Schedule 1 to
Assignment of Trademarks**

| Mark | Registration No. | Issue Date | Int. Class(es) |
|---------------------------------|------------------|------------|--------------------------|
| THE LIFE@WORK CO. and Design | 2,254,977 | 06/22/99 | Int. Classes 9 and 16 |

| Mark | Application Serial No. | Filing Date | Int. Class(es) |
|-------------------------|------------------------|-------------|----------------|
| LIFE@WORK and Design | 75/635,121 | 02/05/99 | Int. Class 35 |
| LIFE@WORK and Design | 75/644,340 | 02/18/99 | Int. Class 41 |